

Our Schedule Test

Name: _____ date: _____

A. **Listen** and **cross out X**

1.			
2.			
3.			
4.			

B. Listen and complete

1. I go to the dentist _____
2. My father goes on vacations _____
3. _____ I brush my teeth.
4. _____ I practice yoga.
5. _____ I eat out.
6. I practice the piano _____
7. I take out the trash _____

C. Vocabulary

Write the vocabulary from the unit















D. **Complete** the chart with your information and **answer** the questions

Activity	Monday	Tuesday	Wednesday	Thursday	Friday
Take out the trash					
Go to the dentist					
Shop for food					
Watch a movie					
Play outside					
Order pizza					
Wash the dishes					
Clean my bedroom					

1. How often do you play outside?

2. How often do you order pizza?

3. How often do you take out the trash?

4. How often do you go to the dentist?

5. How often do you watch a movie?

6. How often do you wash the dishes?

7. How often do you clean your bedroom?
